

FEC  
FORM 1STATEMENT OF  
ORGANIZATION

RECEIVED

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FEC MAIL CENTER

1. NAME OF  
COMMITTEE (in full)(Check if name  
is changed)Example: If typing, type  
over the lines.

12FE4M5

PIONEER PAC

ADDRESS (number and street)

10 West Broadway, Suite 500

X (Check if address  
is changed)

Salt Lake City

UT

84101

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

mike@mccauleyassociatespc.com

X (Check if address  
is changed)

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address  
is changed)

2. DATE

M M / D D / Y Y Y Y  
06 26 2012

3. FEC IDENTIFICATION NUMBER

C C00452771

4. IS THIS STATEMENT

X

NEW (N)

OR

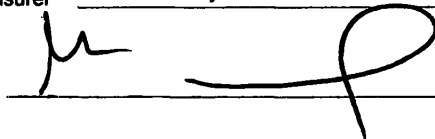
AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Mike McCauley

Signature of Treasurer



Date

M M / D D / Y Y Y Y  
07 12 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office  
Use  
OnlyFor further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100FEC FORM 1  
(Revised 02/2009)

12030854225

**Candidate Committee:**

- District

- Party Committee:**

- ### Political Action Committee (PAC):

- ## Cooperative

**X** In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

[illegible]

Write or Type Committee Name

**PIONEER PAC****6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor****ROBERT BISHOP**

Mailing Address

**74 NORTH 300 EAST****BRIGHAM CITY**

CITY

**UT**

STATE

**84302**

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative ☒ Leadership PAC Sponsor**7. Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

**Mike McCauley**

Mailing Address

**10 West Broadway, Suite 500****Salt Lake City**

CITY

**UT**

STATE

**84101**

ZIP CODE

Treasurer

Telephone number

**801****706****4427****8. Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).Full Name  
of Treasurer**Mike McCauley**

Mailing Address

**10 West Broadway, Suite 500****Salt Lake City**

CITY

**UT**

STATE

**84101**

ZIP CODE

Title or Position  
Treasurer

Telephone number

**801****706****4427**

12030854227

Full Name of  
Designated  
Agent

Mailing Address

Title or Position

Telephone number

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Zion's Bank

Mailing Address

One South Main St.

Salt Lake City

UT

84133

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

12030854228

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input checked="" type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

*PAID*  
**PREPARER**  
(3/2005)

7/20/12  
**DATE PREPARED**

12030854229